



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
12/24/2024	202434802898	OHIO LLC - AMENDMENT (LAM)	50.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

MELANIE CAUDILL
302 WEST 3RD STREET
SUITE 300
CINCINNATI, OH 45202

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose
1616428

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
MERUS LLC

and, that said business records show the filing and recording of:

Document(s)

OHIO LLC - AMENDMENT

Document No(s):

202434802898

Effective Date: 12/31/2024



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio this
24th day of December, A.D. 2024.

Ohio Secretary of State

Form 611 Prescribed by:

Date Electronically Filed: 12/23/2024



Telephone: 877.767.3453

OhioSoS.gov | business@OhioSoS.govFile online or for more information: OhioBusinessCentral.gov

Domestic Limited Liability Company Certificate of Amendment or Restatement

Filing Fee: \$50**Form Must Be Typed****(CHECK ONLY ONE (1) BOX)**

(1) Domestic Limited Liability Company

☒ Amendment (129-LAM)

(2) Domestic Limited Liability Company

☐ Restatement (142-LRA)

AL. NEYER, LLC

Name of Limited Liability Company

1616428

Registration Number

Optional:

Effective Date (MM/DD/YYYY) 12/31/2024

Effective Time 11:30 PM

Pursuant to Ohio Revised Code Section 1706.172(D), a certificate of amendment delivered to the Ohio Secretary of State for filing under this chapter may specify an effective time and a delayed effective date of not more than ninety days following the date of receipt by the Secretary of State. A certificate of amendment is effective as provided in Ohio Revised Code Section 1706.172(D).

If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.

Name of Limited Liability Company Merus LLC

(Name must include one of the following words or abbreviations:
"limited liability company", "limited", "LLC", "L.L.C.", "Ltd.", or "Ltd".)

Purpose

If applicable, attach a statement as provided in division (B)(3) of section 1706.761 of the Ohio Revised Code to state that the LLC may have one or more series of assets subject to limitations.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

This filing must be signed by at least one person authorized by the limited liability company.

If the person is an individual, then he or she must sign on the "signature" line and print his or her name in the "Print Name" Box.

If the person is a business entity, please print the name of the entity in the "Signature" box and an authorized representative of the business must sign in the "By" box and print his or her name and title or authority in the "Print Name Box."

AL. NEYER, LLC

Signature

LESLEY S. KOTH, SVP & GENERAL COUNSEL

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
12/20/2024	202435404486	Name Reservation Transfer (NRT)	25.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

KEATING MUETHING & KLEKAMP
SUITE 1400 ONE EAST FOURTH STREET
CINCINNATI, OH 45202

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose
5263017

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
MERUS LLC

and, that said business records show the filing and recording of:

Document(s)

Name Reservation Transfer

Document No(s):

202435404486

Effective Date: **12/20/2024**



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio this
20th day of December, A.D. 2024.

Ohio Secretary of State

Form 534B Prescribed by:



Telephone: 877.767.3453

OhioSoS.gov | business@OhioSoS.govFile online or for more information: OhioBusinessCentral.gov

Name Reservation / Transfer / Cancellation

Reservation Filing Fee: \$39 (160-NRO)**Transfer Filing Fee: \$25 (185-NRT)****Cancellation Filing Fee: \$25 (184-RNX)****Form Must Be Typed****CHECK ONLY ONE (1) BOX**☐ (1) Original Name Reservation

Applicant is reserving the name on behalf of a: proposed new corporation, limited liability company or business trust; or an existing corporation, limited liability company, or business trust intending to change its name.

☒ (2) Name Reservation Transfer

Reservation Number

5263017

Reserved Name

MERUS LLC

☐ (3) Name Reservation Cancellation

Reservation Number

5263017

Reserved Name

MERUS LLC

Complete only if box (1) is checked

Please reserve the first name available (only one name may be reserved per form) in the order of preference listed below. I understand that I am not granted the reservation until I receive written confirmation from the Secretary of State's office stating that the name has been reserved for me. The name reservation is valid for a period of **180 days** from the date of filing.

First Choice

Second Choice

Third Choice

Applicant Information

Name (Business Entity or Individual)

Mailing Address

City

State

ZIP Code

Complete only if box (2) is checked

Al. Neyer, LLC

Transferee Name (New Applicant Name)

302 W. 3rd Street, Suite 300

Mailing Address

Cincinnati

City

Ohio

State

45202

ZIP Code

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

This document must be signed by the applicant or by any authorized representative of the applicant.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Mark E. Musekamp

Signature

By (if applicable)

Mark E. Musekamp

Print Name

Signature

By (if applicable)

Print Name